Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF ILLINOIS		
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on	Brandi	
your government-issued	First name	First name
example, your driver's	R	
license or passport).	Middle name	Middle name
Bring your picture identification to your	Harris	
meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years	Brandi Reneshia Harris	
Include your married or maiden names.	Brandi Harris	
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7210	
	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. Bring your picture identification to your meeting with the trustee. Harris Last name and Suffix (Sr., Jr., II, III) All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Brandi First name Harris East name and Suffix (Sr., Jr., II, III)

Debtor 1 Brandi R Harris

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	2006 Celebration Park Cir	If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Saint Clair County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case number (if known)

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	■ Chap	ter 7					
		☐ Chap	ter 11					
		☐ Chap	ter 12					
		☐ Chap	ter 13					
8.	How you will pay the fee	abo	out how yo	ou may pay. Typic attorney is submi	ally, if you are paying the fee yo	k with the clerk's office in your local court fo burself, you may pay with cash, cashier's ch alf, your attorney may pay with a credit card	neck, or money	
						on, sign and attach the Application for Indiv	iduals to Pay	
		☐ Ire	equest tha	at my fee be waiv		n only if you are filing for Chapter 7. By law our income is less than 150% of the official		
		apı	plies to yo	ur family size and	you are unable to pay the fee in	n installments). If you choose this option, your choose this option, your petition	ou must fill out	
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.	District		NA/Is a se	Occasional an		
			District			Case number		
			District District		When When	Case number Case number		
			DISTRICT		vviien	Case number		
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor			Relationship to you		
			District		When	Case number, if known		
			Debtor			Relationship to you		
			District		When	Case number, if known		
11.	Do you rent your residence?	■ No.	Go to	line 12.				
	residence:	☐ Yes.	Has yo	our landlord obtain	ned an eviction judgment agains	st you?		
				No. Go to line 12	2.			
				Yes. Fill out Initia	al Statement About an Eviction	Judgment Against You (Form 101A) and file	e it as part of	

Debtor 1 Brandi R Harris

Deb	otor 1 Brandi R Harris				Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Owi	n as a Sole Propriet	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of bus	iness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Stat	e & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines	s. If you in s, cash-f	ndicate that you are a low statement, and for	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure		
	For a definition of small	■ No.	Iam	I am not filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11.		
		☐ Yes.			11, I am a small business debtor according to the definition in the Bankruptcy Code, and r Subchapter $$ V of Chapter 11.		
Par	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	y Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is alleged to pose a threat of imminent and	■ No.	What is	the hazard?			
	identifiable hazard to public health or safety? Or do you own any						
	property that needs immediate attention?			diate attention is , why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number Street City State & Zin Code		
					Number, Street, City, State & Zip Code		

Debtor 1 Brandi R Harris

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Brandi R Harris			Case nu	mber (if known)				
Par	t 6: Answer These Quest	ions for R	eporting Purposes						
16.	What kind of debts do you have?	16a.		ily consumer debts? Consumer debts are personal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts y	ou owe that are not consumer debts or bus	iness debts				
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Cha	apter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	Yes.		r 7. Do you estimate that after any exempt pe available to distribute to unsecured credit	property is excluded and administrative expenses tors?				
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured		□Yes						
	creditors?								
18.	How many Creditors do	■ 1-49		□ 1,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	□ 50-99		□ 5001-10,000	☐ 50,001-100,000				
	owe?	□ 100-1	99	□ 10,001-25,000	☐ More than100,000				
		□ 200-9	99						
19.	How much do you ■ \$0		50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion				
			001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
		□ \$500,	001 - \$1 million	— \$100,000,001 - \$300 Hillion	Li More than \$50 billion				
20.	How much do you	□ \$0 - \$	50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	_ ' '	001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion				
		— \$500,		<u> </u>					
Par	t7: Sign Below								
For	you	I have ex	amined this petition, and	I declare under penalty of perjury that the ir	nformation provided is true and correct.				
				oter 7, I am aware that I may proceed, if elig the relief available under each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I I choose to proceed under Chapter 7.				
				did not pay or agree to pay someone who is ad the notice required by 11 U.S.C. § 342(b)					
		I request	relief in accordance with	the chapter of title 11, United States Code,	specified in this petition.				
		bankrupt and 357	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.						
			idi R Harris R Harris	Signature of De	ebtor 2				
			e of Debtor 1	- J					
		Executed	on February 20, 20	20 Executed on					
			MM / DD / YYYY		MM / DD / YYYY				

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 7 of 62

Debtor 1	Brandi R Harris	Case number (if known)	
----------	-----------------	------------------------	--

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

Date	February 20, 2020 MM / DD / YYYY	
Email address	jd@jdgrahamlaw.com	
		MM / DD / YYYY

- :11 :	n this information to identify your cook				
	n this information to identify your case	:			
Deb	or 1 Brandi R Harris First Name	Middle Name	Last Name		
Deb	or 2 Se if, filing) First Name	Middle Name	Last Name		
		OUTHERN DISTRICT			
		DOTTIENN DISTRICT	OI ILLINOIS		
(if kno	e number wn)			_	c if this is an ded filing
	icial Form 106Sum	l Liabilities ar	nd Certain Statistical Information		12/15
Be as infor your	complete and accurate as possible. I nation. Fill out all of your schedules fi original forms, you must fill out a new	two married peoplerst; then complete th	e are filing together, both are equally responsible for information on this form. If you are filing amend		
Part	1: Summarize Your Assets				
				Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 1a. Copy line 55, Total real estate, from	106A/B) Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal property	, from Schedule A/B.		\$	14,957.00
	1c. Copy line 63, Total of all property on	Schedule A/B		\$	14,957.00
Part	2: Summarize Your Liabilities				
					abilities t you owe
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		(Official Form 106D) the bottom of the last page of Part 1 of Schedule D	\$	14,351.36
3.	Schedule E/F: Creditors Who Have Unsta 3a. Copy the total claims from Part 1 (pr		al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the total claims from Part 2 (no	onpriority unsecured o	claims) from line 6j of Schedule E/F	\$	56,619.20
			Your total liabilities	\$	70,970.56
Part	3: Summarize Your Income and Exp	enses			
4.	Schedule I: Your Income (Official Form 1 Copy your combined monthly income from		ə I	\$	4,092.77
5.	Schedule J: Your Expenses (Official For Copy your monthly expenses from line 2			\$	3,736.55
Part	4: Answer These Questions for Adr	ninistrative and Stat	istical Records		
6.	Are you filing for bankruptcy under C ☐ No. You have nothing to report on t	•	heck this box and submit this form to the court with yo	our other sch	nedules.
7.	■ Yes What kind of debt do you have?				
			debts are those "incurred by an individual primarily for og for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consthe court with your other schedules		ve nothing to report on this part of the form. Check this	s box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 9 of 62

Debtor 1 Brandi R Harris Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

4,843.56

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clair	n
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	1,861.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,861.00

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 10 of 62

1. Do you own or have any legal or eq No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, sp No Yes 3.1 Make: Mercedes-Benz Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors, motors, motors. No Yes 5 Add the dollar value of the points.	fy your case a	nd this filing:			
Debtor 2 (Spouse, if filing) United States Bankruptcy Court for Case number Official Form 106A/B Schedule A/B: Pr In each category, separately list and dithink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equal No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or someone else drives. If you lease a someon		nd this ming.			
United States Bankruptcy Court for Case number Official Form 106A/B Schedule A/B: Pr In each category, separately list and dethink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equal No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or someone else drives. If you lease a someone else else		Middle Name	Last Name		
United States Bankruptcy Court for Case number Official Form 106A/B Schedule A/B: Pr In each category, separately list and dithink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equives. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a someone else drives.		Middle Name	Last Name		
Official Form 106A/B Schedule A/B: Pr In each category, separately list and dethink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equivalent No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, spundodel: GLK350 Year: Q012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors, spundodel: Yes 5 Add the dollar value of the points.					
Official Form 106A/B Schedule A/B: Pr In each category, separately list and dethink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equivalent No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, spundodel: GLK350 Year: Q012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors, and the dollar value of the points.	or the:	HERN DISTRICT OF	- ILLINOIS		
Schedule A/B: Pr In each category, separately list and dethink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equivalent No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, spundodel: GLK350 Yes: Q012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors. No Yes 5 Add the dollar value of the points.					☐ Check if this is an
Schedule A/B: Province in each category, separately list and dethink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equivalent in the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a someone else driv					amended filing
Schedule A/B: Province in each category, separately list and dethink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equivalent in the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a someone else driv	'D				
In each category, separately list and dithink it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equivalence in No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease at 3. Cars, vans, trucks, tractors, spundodel: No Yes 3.1 Make: Mercedes-Benz Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors, mot					
think it fits best. Be as complete and a information. If more space is needed, a Answer every question. Part 1: Describe Each Residence, But 1. Do you own or have any legal or equivalence in No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, spundodel: GLK350 Yes 3.1 Make: Mercedes-Benz Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors, motors					12/15
1. Do you own or have any legal or eq No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, sp No Yes 3.1 Make: Mercedes-Benz Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors, motors, motors. No Yes 5 Add the dollar value of the points.	d accurate as po	ssible. If two married	people are filing together, both are	equally responsible for s	upplying correct
No. Go to Part 2. Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease at 3. Cars, vans, trucks, tractors, spoon No Yes 3.1 Make: Mercedes-Benz Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor home Examples: Boats, trailers, motors. No Yes 5 Add the dollar value of the points.	Building, Land,	or Other Real Estate \	ou Own or Have an Interest In		
Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, sp □ No ■ Yes 3.1 Make: Mercedes-Benz Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor hom Examples: Boats, trailers, motors,	equitable interes	st in any residence, bu	ilding, land, or similar property?		
Part 2: Describe Your Vehicles Do you own, lease, or have legal of someone else drives. If you lease a 3. Cars, vans, trucks, tractors, sp □ No ■ Yes 3.1 Make: Mercedes-Benz Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor hom Examples: Boats, trailers, motors,					
Do you own, lease, or have legal of someone else drives. If you lease a someone else drives. Specification in the someone else drives. If you lease a someone else else else else else else else el					
Do you own, lease, or have legal of someone else drives. If you lease a someone else drives. Specification in the someone else drives. If you lease a someone else else else else else else else el					
Do you own, lease, or have legal of someone else drives. If you lease a someone else drives. Specification in the someone else drives. If you lease a someone else else else else else else else el					
Model: GLK350 Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor hom Examples: Boats, trailers, motors. NO Yes Add the dollar value of the point.	sport utility ve	nicies, motorcycles			
Year: 2012 Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor hom Examples: Boats, trailers, motors, NO Yes 5 Add the dollar value of the points.	ız	Who has an interes	et in the property? Check one		elaims or exemptions. Put
Approximate mileage: Other information: NADA Value 4. Watercraft, aircraft, motor hom Examples: Boats, trailers, motors, No Yes 5 Add the dollar value of the points.		■ Debtor 1 only			ed claims on <i>Schedule D:</i> ims Secured by Property.
Other information: NADA Value 4. Watercraft, aircraft, motor hom Examples: Boats, trailers, motors, No Yes 5 Add the dollar value of the points.	405.000	Debtor 2 only		Current value of the	Current value of the
4. Watercraft, aircraft, motor hom Examples: Boats, trailers, motors, ■ No □ Yes 5 Add the dollar value of the points.	105,000	☐ Debtor 1 and De	otor 2 only e debtors and another	entire property?	portion you own?
Examples: Boats, trailers, motors. ■ No □ Yes 5 Add the dollar value of the points.		_	community property	\$11,775.00	\$11,775.00
Part 3: Describe Your Personal and Do you own or have any legal or	rs, personal wa portion you ow r Part 2. Write t	tercraft, fishing vessor n for all of your ent that number here	els, snowmobiles, motorcycle acc	entries for	\$11,775.00 Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 1

D	ebtor 1	Brandi R Harris	Case	number (if known)	
6.		nold goods and furnishin les: Major appliances, furn	ngs niture, linens, china, kitchenware		
	_	Describe			
		Applia	g Room, Bedroom, Dining Room Furniture, Small Kitche ances and Cookware, Photos and Books, Miscellaneous Decor and Textiles		\$800.00
7.	Electron Examp	les: Televisions and radios	s; audio, video, stereo, and digital equipment; computers, printers, cameras, media players, games	scanners; music o	collections; electronic devices
	Yes.	Describe			
		TVs (3), Cell phone		\$400.00
8.	Examp. ■ No	ibles of value les: Antiques and figurines other collections, mer Describe	s; paintings, prints, or other artwork; books, pictures, or other art ob norabilia, collectibles	ects; stamp, coin	, or baseball card collections;
9.	Examp	nent for sports and hobb les: Sports, photographic, musical instruments	ies exercise, and other hobby equipment; bicycles, pool tables, golf clu	ıbs, skis; canoes	and kayaks; carpentry tools;
10	■ No		ns, ammunition, and related equipment		
11	. Clothe Exam		rs, leather coats, designer wear, shoes, accessories		
	Yes.	Describe			
		Every	day Clothes and Shoes		\$200.00
12	□ No	ples: Everyday jewelry, co Describe	stume jewelry, engagement rings, wedding rings, heirloom jewelry,	watches, gems,	
			Illaneous Costume Jewelry		\$20.00
13	Exam _i ■ No	arm animals ples: Dogs, cats, birds, ho	rses		
		Describe			
14	■ No		hold items you did not already list, including any health aids y	ou did not list	
	⊔ Yes.	Give specific information			
1			your entries from Part 3, including any entries for pages you h here	ave attached	\$1,420.00

Official Form 106A/B Schedule A/B: Property

page 2

De	btor 1	Brandi R Harris			Case number (if known)	
	_					
		scribe Your Financial <i>I</i> In or have any legal			in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	□ No				home, in a safe deposit box, and on hand when you file your petition	
					Cash	\$20.00
					ccounts; certificates of deposit; shares in credit unions, brokerage hounts with the same institution, list each.	uses, and other similar
					Institution name:	
		1	7.1.	Checking	Bank of America (9262)	\$0.78
		1	7.2.	Checking	Bank of America (1710)	\$28.48
		1	7.3.	Checking	Navy Federal Credit Union (2511)	\$0.00
		1	7.4.	Checking	Bank of America (9702)	\$0.43
		1	7.5.	Savings	Bank of America (2012)	\$150.01
		1	7.6.	Savings	Navy Federal Credit Union (7533)	\$4.30
18.		mutual funds, or p			brokerage firms, money market accounts	
	■ No □ Yes			Institution or issu	er name:	
19.	Non-pu joint v		and i	interests in inco	rporated and unincorporated businesses, including an interest in	n an LLC, partnership, and
		Give specific informa		about themne of entity:		
	Negoti Non-ne	able instruments incl	ude p	ersonal checks,	egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. transfer to someone by signing or delivering them.	
	■ No □ Yes.	Give specific informa		about them ner name:		
	<i>Examp</i> ■ No		ERIS	SA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing pla	ans
		List each account se T n 106A/B		ely. of account:	Institution name: Schedule A/B: Property	page 3

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 13 of 62 Debtor 1 **Brandi R Harris** Case number (if known)

	have made so that you may continue service or use froi prepaid rent, public utilities (electric, gas, water), telecc		es. or others
□ No	, , , , , , , , , , , , , , , , , , , ,		,
Yes	Institution name or individual:		
Rent	Mahood Maher		\$925.00
23. Annuities (A contract for a periodic pay No Yes Issuer name and	ment of money to you, either for life or for a number of description.	years)	
24. Interests in an education IRA, in an ac 26 U.S.C. §§ 530(b)(1), 529A(b), and 52	ecount in a qualified ABLE program, or under a quate (b)(1).	lified state tuition prog	gram.
	and description. Separately file the records of any intere	sts.11 U.S.C. § 521(c):	
25. Trusts, equitable or future interests i■ No□ Yes. Give specific information about	n property (other than anything listed in line 1), and them	rights or powers exer	cisable for your benefit
, .,	le secrets, and other intellectual property basites, proceeds from royalties and licensing agreemen them	ts	
 27. Licenses, franchises, and other gene Examples: Building permits, exclusive ■ No □ Yes. Give specific information about 	licenses, cooperative association holdings, liquor licens	es, professional license:	s
Money or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you ☐ No ■ Yes. Give specific information about t	hem, including whether you already filed the returns an	d the tax years	
	2019 Estimated Income Tax Refund (2018 Received \$4,053; EIC \$1,259; ACTC \$2,361)	Federal	\$433.00
	2019 (IL) Estimated Income Tax Refund (2018 Received \$197; EIC \$652)	State	\$0.00
29. Family support Examples: Past due or lump sum alimo ■ No □ Yes. Give specific information	ony, spousal support, child support, maintenance, divord	e settlement, property s	settlement

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

■ No

 \square Yes. Give specific information..

De	btor 1	Brandi R Harris		Case number (if known)	
31.		sts in insurance policion		(HSA); credit, homeowner's, or renter's insurar	nce
	■ No				
	⊔ Yes.		empany of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
	If you		is due you from someone who has d living trust, expect proceeds from a life	lied insurance policy, or are currently entitled to rec	eive property because
		Give specific informati	on		
			whether or not you have filed a laws ment disputes, insurance claims, or righ		
	□ Yes.	Describe each claim			
	Other	contingent and unliqu	idated claims of every nature, includi	ing counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim			
	Any fir ■ No	nancial assets you did	not already list		
		Give specific informati	on		
36			of your entries from Part 4, including er here	any entries for pages you have attached	\$1,562.00
Pai	rt 5: De	scribe Any Business-Rel	ated Property You Own or Have an Interes	t In. List any real estate in Part 1.	
_	_	own or have any legal or o to Part 6.	equitable interest in any business-related	property?	
ı	Yes. 0	Go to line 38.			
					0 1 1 11
					Current value of the portion you own? Do not deduct secured claims or exemptions.
38.	Accou	nts receivable or com	missions you already earned		
	■ No		,		
	☐ Yes.	Describe			
		equipment, furnishing ples: Business-related o		copiers, fax machines, rugs, telephones, desks	chairs, electronic devices
		Describe			
	Machi r □ No	nery, fixtures, equipmo	ent, supplies you use in business, an	d tools of your trade	
	Yes.	Describe			
		Vin	yl machine		\$200.00
41.	Invent	ory			
	■ No	Describe			

☐ Yes. Describe.....

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 15 of 62

Debto	Brandi R Harris		Case number (if known)	
42. In t	erests in partnerships or joint ventures			
	No			
	Yes. Give specific information about them Name of entity:		% of ownership:	
43. C ι ■ N	stomer lists, mailing lists, or other compilations			
	o your lists include personally identifiable information (as defined in	11 U.S.C. § 101(41A))?		
	■ No □ Yes. Describe			
44. A r	ny business-related property you did not already list			
	Yes. Give specific information			
	add the dollar value of all of your entries from Part 5, including Part 5. Write that number here		-	\$200.00
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	it In.	
46. D o	you own or have any legal or equitable interest in any farm	- or commercial fishin	g-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
_E	you have other property of any kind you did not already list examples: Season tickets, country club membership	?		
	No Yes. Give specific information			
54. <i>A</i>	add the dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
Part 8	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$0.00
56. F	Part 2: Total vehicles, line 5	\$11,775.00		<u> </u>
	Part 3: Total personal and household items, line 15	\$1,420.00		
	Part 4: Total financial assets, line 36	\$1,562.00		
	Part 5: Total business-related property, line 45	\$200.00		
	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
	Part 7: Total other property not listed, line 54	\$0.00		
	otal personal property. Add lines 56 through 61	\$14,957.00	Copy personal property to	otal \$14,957.00
63. 1	otal of all property on Schedule A/B. Add line 55 + line 62			\$14 957 00

Official Form 106A/B Schedule A/B: Property page 6

		Casa 20) 20160 lkg - Dog	o 1 Filad 02/20/2	0 Daga 16	of 62
		Case 20	0-30169-lkg Dod	c 1 Filed 02/20/2	0 Page 16	01 02
Fil	l in this infor	nation to identify your	case:			
De	btor 1	Brandi R Harris				
1 -	btor 2	First Name	Middle Name	Last Name		
(Sp	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS		
1	se number _ nown)					☐ Check if this is an amended filing
Oi	fficial Fo	rm 106C				
S	chedul	e C: The Pro	perty You C	laim as Exer	mpt	4/19
ree cas For spe any fun exe	ded, fill out an e number (if ki each item of ecific dollar an applicable si ds—may be u emption to a p	d attach to this page as r nown). property you claim as o nount as exempt. Alter tatutory limit. Some exe unlimited in dollar amou	many copies of Part 2: Add exempt, you must specif natively, you may claim t emptions—such as those int. However, if you clair	ditional Page as necessary. Ty the amount of the exement the full fair market value of the for health aids, rights to man exemption of 100% of the distribution of the full fair man exemption of the full fair man exem	On the top of any ption you claim. (If the property being receive certain but fair market value.)	claim as exempt. If more space is additional pages, write your name and One way of doing so is to state a ing exempted up to the amount of enefits, and tax-exempt retirement e under a law that limits the , your exemption would be limited
Pa	rt 1: Identi	fy the Property You Cla	im as Exempt			
1.	Which set of	exemptions are you cl	aiming? Check one only,	even if your spouse is filing	g with you.	
	You are cl	aiming state and federal	nonbankruptcy exemption	ns. 11 U.S.C. § 522(b)(3)		
	☐ You are cl	aiming federal exemption	ns. 11 U.S.C. § 522(b)(2)			
2.	For any prop	perty you list on Schede	ule A/B that you claim as	s exempt, fill in the inform	ation below.	
		ion of the property and line that lists this property	e on Current value of t portion you own	the Amount of the exempt	ion you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	m Check only one box for	each exemption.	
	Linda - Dan	Dadasanı Dinima				705 II 00 5/40 4004/L)

	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Living Room, Bedroom, Dining Room Furniture, Small Kitchen Appliances	\$800.00		\$800.00	735 ILCS 5/12-1001(b)
and Cookware, Photos and Books, Miscellaneous Home Decor and Textiles Line from Schedule A/B: 6.1	J		100% of fair market value, up to any applicable statutory limit	
TVs (3), Cell phone Line from Schedule A/B: 7.1	\$400.00		\$400.00	735 ILCS 5/12-1001(b)
Line Hotti Schedule PAB. 1.1			100% of fair market value, up to any applicable statutory limit	
Everyday Clothes and Shoes Line from Schedule A/B: 11.1	\$200.00		\$200.00	735 ILCS 5/12-1001(a)
Line Holl Galledale AVB. 1111			100% of fair market value, up to any applicable statutory limit	
Miscellaneous Costume Jewelry Line from Schedule A/B: 12.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Line Horr Schedule PVB. 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Line from Generalie PVD. 1911			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

De	ebtor 1 Brandi R Harris			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Checking: Bank of America (9262) Line from <i>Schedule A/B</i> : 17.1	\$0.78		\$0.78 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Checking: Bank of America (1710) Line from Schedule A/B: 17.2	\$28.48		\$28.48 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Checking: Bank of America (9702) Line from Schedule A/B: 17.4	\$0.43		\$0.43 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Savings: Bank of America (2012) Line from Schedule A/B: 17.5	\$150.01		\$100.01 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Savings: Navy Federal Credit Union (7533) Line from Schedule A/B: 17.6	\$4.30		\$4.30 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Rent: Mahood Maher Line from Schedule A/B: 22.1	\$925.00		\$925.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-901
	Federal: 2019 Estimated Income Tax Refund (2018 Received \$4,053; EIC \$1,259; ACTC \$2,361) Line from Schedule A/B: 28.1	\$433.00		\$433.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
	Vinyl machine Line from Schedule A/B: 40.1	\$200.00		\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(d)
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	3 years after that for ca	ises fi		

	Case	20-30169-ikg Doc 1	L Filed 02/2	20/20 Page 18	3 01 62	
Fill in this informat	tion to identify yo	ur case:				
Debtor 1	Brandi R Harris	5			7	
-	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankı	ruptcy Court for the	SOUTHERN DISTRICT OF	ILLINOIS			
Case number						
(if known)					_	if this is an
					amend	ded filing
Official Form	106D					
		s Who Have Claim	s Socurod	by Proporty	,	40/45
Scriedule D	. Creditors	WIID Have Claim	<u>s secureu</u>	by Property		12/15
		If two married people are filing tog out, number the entries, and attack				
1. Do any creditors ha	ve claims secured b	y your property?				
□ No. Check th	is box and submit	this form to the court with your ot	ther schedules. Yo	u have nothing else to	report on this form.	
■ Yes. Fill in al	l of the information	below.				
Part 1: List All S	Secured Claims					
2. List all secured cla	ims. If a creditor has	more than one secured claim, list the	e creditor separately	Column A	Column B	Column C
for each claim. If more	than one creditor ha	s a particular claim, list the other credical order according to the creditor's i	ditors in Part 2. As	Do not deduct the	Value of collateral that supports this claim	Unsecured portion If any
2.1 Capital One	Auto Finance	Describe the property that secur	res the claim:	\$14,351.36	\$11,775.00	\$2,576.36
Creditor's Name		2012 Mercedes-Benz GL	K350			
		105,000 miles				
Attn: Bankr		NADA Value As of the date you file, the claim	is: Check all that			
Po Box 3028	s5 ty, UT 84130	apply.				
		☐ Contingent				
Number, Street, Ch	ty, State & Zip Code	Unliquidated				
Who owes the debt	? Check one.	☐ Disputed Nature of lien. Check all that app	olv.			
■ Debtor 1 only		☐ An agreement you made (such	•	ıred		
Debtor 2 only		car loan)				
Debtor 1 and Debtor	or 2 only	☐ Statutory lien (such as tax lien,	mechanic's lien)			
☐ At least one of the	•	☐ Judgment lien from a lawsuit	·			
Check if this clain community debt		Other (including a right to offse		loney Security		
Date debt was incurre	ed 12/18	Last 4 digits of account n	number <u>5957</u>			
Add the dollar value	e of vour entries in (Column A on this page. Write that r	number here:	\$14,351	.36	
	•	I the dollar value totals from all pag		\$14,351		
Write that number h	nere:			φ14,331		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 19 of 62

		Ousc 20	7 00±00 IK	9 2001	1 1100 02	120120	age 10 or	02	
Fill in t	this informa	ation to identify your	case:						
Debtor	1	Brandi R Harris							
Debtor	2	First Name	Middle Nan	ne	Last Name				
(Spouse		First Name	Middle Nan	ne	Last Name				
United	States Bank	cruptcy Court for the:	SOUTHERN	DISTRICT OF	ILLINOIS				
Case n	number							_	neck if this is an nended filing
	al Form	<u>106E/F</u> F: Creditors W	ho Have I	Insecure	d Claims				12/15
any exec Schedul Schedul Ieft. Atta name an	cutory contra e G: Executo e D: Creditor ich the Conti ind case numb	accurate as possible. Us icts or unexpired leases ry Contracts and Unexp s Who Have Claims Sec nuation Page to this pag per (if known).	that could result ired Leases (Offi ured by Property e. If you have no	t in a claim. Als icial Form 106G r. If more space o information to	so list executory o). Do not include is needed, copy t	contracts on S any creditors the Part you n	chedule A/B: Prop with partially secu eed, fill it out, nur	perty (Officia ured claims to nber the enti	that are listed in ries in the boxes on the
Part 1:		s have priority unsecure							
_	No. Go to Par	• •	a ciaims agamst	you.					
	Yes.	12.							
	165.								
Part 2:	List All	of Your NONPRIORIT	Y Unsecured C	laims					
3. Do	any creditors	s have nonpriority unsec	ured claims aga	inst you?					
	No. You have	nothing to report in this pa	art. Submit this fo	rm to the court w	vith your other sche	edules.			
	Yes.								
uns	secured claim, n one creditor	conpriority unsecured clause the creditor separately holds a particular claim, li	for each claim. F	or each claim lis	sted, identify what t	ype of claim it i	s. Do not list claims	s already incl	uded in Part 1. If more
									Total claim
4.1		le Dentistry	L	ast 4 digits of a	account number			=	\$200.00
	1801 Nor Suite C	Creditor's Name th Belt West	V	When was the do	ebt incurred?				
	Number Stre	eet City State Zip Code ed the debt? Check one.		s of the date yo	ou file, the claim i	is: Check all tha	at apply		
	Debtor 1	only	[☐ Contingent					
	Debtor 2	only		Unliquidated					
		and Debtor 2 only		☐ Disputed					
		one of the debtors and and	_		ORITY unsecured	d claim:			
		this claim is for a comr		☐ Student loans					
	debt	subject to offset?		Obligations ar eport as priority o		ration agreeme	ent or divorce that y	ou did not	
	■ No		[Debts to pens	sion or profit-sharin	g plans, and ot	her similar debts		
	☐ Yes		ı	Other. Specify	Dental Bill				

Debto	Brandi R Harris	Case number (if known)	
4.2	Ameren IP	Last 4 digits of account number 7072	\$3,981.82
	Nonpriority Creditor's Name Credit & Collections 2105 E State Route 104 Pawnee, IL 62558	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility Bill	
4.3	Brother Loan & Finance Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00
	327 Missouri Avenue Suite 504 East Saint Louis, IL 62201	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Outstanding Account	
4.4	Capital One Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$8,776.00
	Attn: Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	→ NO	Other Specify Credit Cards	

Debtor	1 Brandi R Harris	Case number (if known)	
4.5	CEPAMERICA ILLINOIS LLP	Last 4 digits of account number	\$762.00
	Nonpriority Creditor's Name PO Box 582663	When was the debt incurred?	
	Modesto, CA 95358 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim is. Gleck all that apply	
	■ Debtor 1 only	□ Contingent	
	Debtor 2 only	☐ Unliquidated	
		·	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
		☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	■ Other. Specify Medical Bill	
4.6	Citifinancial aka OneMain Financial Nonpriority Creditor's Name	Last 4 digits of account number	\$1,500.00
	NTBS-2320	When was the debt incurred?	
	6801 Colwell Blvd.		
	Irving, TX 75039 Number Street City State Zip Code	As of the data you file the claim is Cheek all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only		
	_	Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Outstanding Account	
4.7	Comet Funding d/b/a Comet Loans	Last 4 digits of account number	\$500.00
7.1	Nonpriority Creditor's Name Tonton Apache Reservation #30	When was the debt incurred?	ψ300.00
	Payson, AZ 85541		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify Outstanding Account	

Debto	Brandi R Harris	Case number (if known)				
4.8	Consumer Collection Management	Last 4 digits of account number	\$239.00			
	Nonpriority Creditor's Name PO Box 1839	When was the debt incurred?				
	Maryland Heights, MO 63043	THE WAS THE GEST HEALTHCAT.				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□Yes	■ Other Specify Collection Account - Club Fitness				
		— Office. Specify				
4.9	Credit Management Company Nonpriority Creditor's Name	Last 4 digits of account number	\$390.00			
	6080 Tennyson Pkwy 100 Plano, TX 75024	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection Account - Charter				
4.1	Credit One Bank		\$941.00			
0	Nonpriority Creditor's Name	Last 4 digits of account number	\$941.00			
	PO Box 98873 Las Vegas, NV 89193	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Credit Card				

Debto	r 1 Brandi R Harris	Case number (if known)				
4.1	Ownerful Book Finance		#0.500.00			
1	Crystal Rock Finance Nonpriority Creditor's Name	Last 4 digits of account number	\$2,500.00			
	327 Missouri Ave; Suite 300 East Saint Louis, IL 62201	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Outstanding Account				
4.1	First Community Credit Union		¢11 955 00			
2	Nonpriority Creditor's Name	Last 4 digits of account number	\$11,855.00			
	1517 Manchester Ballwin, MO 63011	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Outstanding Account				
4.1	H3 Capital	Last 4 digits of account number	\$654.00			
3	Nonpriority Creditor's Name	Last 4 digits of account flumber				
	, , , , , , , , , , , , , , , , , , , ,	When was the debt incurred?				
	O Fallon, IL 62269					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	_	_				
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes					
	□ res	■ Other. Specify Outstanding Account				

Brandi R Harris	Case number (if known)				
Haartland Warrania Haalthaara		¢500.00			
Heartland Women's Healthcare Nonpriority Creditor's Name	Last 4 digits of account number	\$500.00			
3230 Veterans Memorial Drive Mount Vernon, IL 62864	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
No	\square Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Medical Bill				
HSHS Medical Group	Last 4 digits of account number	\$25.00			
Nonpriority Creditor's Name		V =5.5			
Patient Financial Services	When was the debt incurred?				
PO Box 20727					
Springfield, IL 62708 Jumber Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	□ Disputed				
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
lebt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
□ Yes	■ Other Specify Medical Bill				
	2040.7404	#500.00			
Ilinois American Water Nonpriority Creditor's Name	Last 4 digits of account number 8012;7491	\$500.00			
PO Box 94551 Palatine, IL 60094	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
□ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharing plans, and other similar debts				
Yes	■ Other. Specify Utility Bills				

Debt	or 1 Brandi R Harris	Case number (if known)	
4.1 7	Infinity Meds LLP	Last 4 digits of account number	\$978.00
	Nonpriority Creditor's Name PO Box 078180	When was the debt incurred?	
	Milwaukee, WI 53278-8180 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
4.1 8	JC Penny	Last 4 digits of account number	\$785.00
	Nonpriority Creditor's Name c/o Synchrony Bank Attn: Bankruptcy Dept PO Box 965060	When was the debt incurred?	
	Orlando, FL 32896 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit Card	
4.1 9	Macy's	Last 4 digits of account number	\$995.00
	Nonpriority Creditor's Name Department Store National Bank Bankruptcy Processing	When was the debt incurred?	
	PO Box 8053 Mason, OH 45040 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Credit Card	

Official Form 106 E/F

Debt	or 1 Brandi R Harris	Case number (if known)	
4.2	National Comica Duranu		₹ 7.044.00
0	National Service Bureau Nonpriority Creditor's Name	Last 4 digits of account number	\$7,641.00
	18912 North Creek Pkwy Suite 205 Bothell, WA 98011	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Outstanding Account	
4.2	NC Financial		\$3,980.00
1	Nonpriority Creditor's Name	Last 4 digits of account number	ψ3,900.00
	175 W. Jackson Blvd	When was the debt incurred?	
	Suite 1000		
	Chicago, IL 60604	As of the data you file the plain in Obesia all that such	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	Пол	
		☐ Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Loan	
4.2	Nelnet	Last 4 digits of account number 8389	\$1.861.00
2	Nonpriority Creditor's Name	Last 4 digits of account number 8389	Φ1,001.00
	3015 South Parker Rd., Suite 400 Aurora, CO 80014	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify	

Student Loan

Debtor	1 Brandi R Harris	Case number (if known)				
4.2			400100			
3	Progressive Insurance	Last 4 digits of account number	\$294.00			
	Nonpriority Creditor's Name 6300 Wilson Mills Rd.	When was the debt incurred?				
	Cleveland, OH 44143 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not				
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Outstanding Account				
4.2	Progressive Leasing	Last 4 digits of account number 2320	\$244.58			
4	Nonpriority Creditor's Name					
	256 W Data Dr Draper, UT 84020	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other. Specify Oustanding Account				
4.2	Radiology Consultants of					
5	MidAmerica	Last 4 digits of account number	\$191.00			
	Nonpriority Creditor's Name 3 Eagle Center	When was the debt incurred?				
	Suite 1 O Fallon, IL 62269					
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	□ Yes					
	□ res	Other. Specify Medical Bill				

Brandi R Harris	Case number (if known)				
Regions Bank	Look A digita of account number	\$557.00			
Nonpriority Creditor's Name	Last 4 digits of account number	Ψ337.00			
4800 W Main St. Belleville, IL 62223	When was the debt incurred?				
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other Specify Outstanding Account				
SIHF Healthcare		\$150.00			
Nonpriority Creditor's Name	Last 4 digits of account number	\$150.00			
PO Box 14099	When was the debt incurred?				
Belfast, ME 04915					
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
<u> </u>					
Debtor 1 only	Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:				
At least one of the debtors and another	Student loans				
☐ Check if this claim is for a community lebt	☐ Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset?	report as priority claims				
No	☐ Debts to pension or profit-sharing plans, and other similar debts				
Yes	Other. Specify Medical Bill				
Sprint	Last 4 digits of account number 3148	\$750.00			
Nonpriority Creditor's Name		4.00.00			
6391 Sprint Parkway	When was the debt incurred?				
Overland Park, KS 66251 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
Who incurred the debt? Check one.	As of the date you file, the claim is. Offect all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
lebt	Obligations arising out of a separation agreement or divorce that you did not				
s the claim subject to offset? No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Yes	■ Other. Specify Outstanding Account				

Debt	or 1 Brandi R Harris	Case number (if known)	
4.2 9	St. Clair County	Last 4 digits of account number 7720	\$289.61
<u> </u>	Nonpriority Creditor's Name Clerk of the Circuit Court PO Box 691	When was the debt incurred?	
	Belleville, IL 62222 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
		15-TR-17720	
	Yes	Other. Specify Court Fines & Costs	
4.3 0	TH Promed Collections	Last 4 digits of account number	\$226.00
	Nonpriority Creditor's Name PO Box 10166 Peoria, IL 61612	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Collection Account - Central IL Radiology	
4.3 1	US Bank	Last 4 digits of account number	\$250.00
	Nonpriority Creditor's Name PO Box 6352 Cincinnati, OH 45201	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Outstanding Account	

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 30 of 62

Debt	or 1 Brandi R Harris	Case number (if known)			
4.3	Verizon	Last 4 digits of account number 7881	\$1,087.19		
	Nonpriority Creditor's Name Bankruptcy Administration 1515 Woodfield Rd	When was the debt incurred?			
	Schaumburg, IL 60173	- As a fall a later of the also defends a fall of the second			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	Поле			
		☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans			
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Outstanding Account			
4.3	Woodforest National Bank	Last 4 digits of account number	\$866.00		
	Nonpriority Creditor's Name PO Box 7889	When was the debt incurred?			
	Spring, TX 77387 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims			
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts			
	Yes	Other. Specify Outstanding Account			
4.3	YMCA Belleville		\$150.00		
4	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ130.00		
	200 S. Illinois Belleville, IL 62220	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply			
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a separation agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims			
	■ No	Debts to pension or profit-sharing plans, and other similar debts			
	Yes	■ Other. Specify Outstanding Account			

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 31 of 62

Debtor 1 Brandi R Harris		Case number (if known)
Name and Address Americollect 1851 S. Alverno Road Manitowoc, WI 54221	On which entry in Part 1 or Part 2 did Line 4.17 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address ATG Credit, LLC PO Box 14895 Chicago, IL 60614	On which entry in Part 1 or Part 2 did Line 4.27 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Consumer Collection Management PO Box 1839 Maryland Heights, MO 63043	On which entry in Part 1 or Part 2 did Line 4.25 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Credit Collection Services Two Wells Ave Dept 9134 Newton Center, MA 02459	On which entry in Part 1 or Part 2 did Line 4.23 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Lindenwood University 209 S. Kingshighway Saint Charles, MO 63301	On which entry in Part 1 or Part 2 did Line 4.20 of (Check one): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 7210
Name and Address LVNV Funding LLC 625 Pilot Rd. Suite 213 Las Vegas, NV 89119	On which entry in Part 1 or Part 2 did Line 4.10 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Sher & Shasbin PC 1 Campbell Plaza Suite 1A North Saint Louis, MO 63139	On which entry in Part 1 or Part 2 did Line 4.3 of (<i>Check one</i>): Last 4 digits of account number	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims
Name and Address Wakefield & Associates PO Box 50250 Knoxville, TN 37950	On which entry in Part 1 or Part 2 did Line 4.5 of (Check one): Last 4 digits of account number	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
Total claims	6a.	Domestic support obligations	6a.	\$ 0.00
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
Total	6f.	Student loans	6f.	\$ 1,861.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00

Official Form 106 E/F

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 32 of 62

Debtor 1 Brandi R Harris Case number (if known)

6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ 56,619.20

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 33 of 62

Fill in this infor	mation to identify your	case:					
Debtor 1	Brandi R Harris						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF ILLINOIS				
Case number							
(if known)					Check if this is an		
					amended filing		

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Manood Maner	Rent \$925/month

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 34 of 62

Fill in this	s information to identify your	case:			
Debtor 1	Brandi R Harris				
Dobtor 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fili	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	SOUTHERN DISTRICT	OF ILLINOIS		
Case num	iher				
(if known)					Check if this is an amended filing
Officia	ll Form 106H				
		lobtoro			10/15
Sched	dule H: Your Cod	ieptors			12/15
your name	you have any codebtors? (If). Answer every question		, -	p of any Additional Pages, write
■ No					
	thin the last 8 years, have yo na, California, Idaho, Louisiana				ty states and territories include
■ No.	. Go to line 3.				
☐ Yes	s. Did your spouse, former spo	ouse, or legal equivalent live	e with you at the time?		
in line Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed t	ng with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				□ Sahadula D. lir	
3.1	Name			_ ☐ Schedule D, lir ☐ Schedule E/F,	
				☐ Schedule G, lir	
-	Number Street				
	City	State	ZIP Code		
3.2				☐ Schedule D, lir	ne
<u> ~</u> .	Name			☐ Schedule E/F,	
				☐ Schedule G, lir	
-	Number Street			_	
	City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2020 Best Case, LLC - www.bestcase.com

Fill	in this information to identify you	r case:										
De	btor 1 Brandi R	Harris										
	btor 2 puse, if filing)				_							
Un	ited States Bankruptcy Court for	the: SOUTHERN DISTRIC	CT OF ILLINOIS									
	se number nown)		-					ed filing ent showin	g postpetition			
0	fficial Form 106l					Ī	лм / DD/ `	YYYY				
S	chedule I: Your In	come								12/1		
sup spo atta	as complete and accurate as populying correct information. If youse. If you are separated and youch a separate sheet to this for Describe Employme	ou are married and not fili our spouse is not filing w n. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i	is liv mati	ing with on abou	you, incl t your sp	lude inforn ouse. If mo	nation about ore space is	t your needed,		
1.	Fill in your employment information.		Debtor 1				Debtor	2 or non-fi	ling spouse			
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed				☐ Employed					
		Employment status	☐ Not employed				☐ Not employed					
		Occupation	Asst. Branch M	lanager								
	Include part-time, seasonal, or self-employed work.	Employer's name	Neighbors Cred	dit Unio	n							
Occupation may include student or homemaker, if it applies. Employer's address 6300 South Lindbergh Blv Saint Louis, MO 63123												
		How long employed t	here? 11 moi	nths			_					
Pa	rt 2: Give Details About M	Ionthly Income										
	imate monthly income as of the use unless you are separated.	e date you file this form. If	you have nothing to	report for	any	line, writ	e \$0 in the	e space. Inc	clude your no	n-filing		
	ou or your non-filing spouse have e space, attach a separate sheet		ombine the information	on for all e	empl	oyers for	that pers	on on the li	nes below. If	you need		
						For De	btor 1		btor 2 or ng spouse			
2.	List monthly gross wages, sa deductions). If not paid month			2.	\$	4	,440.32	\$	N/A	-		
3.	Estimate and list monthly ov	ertime pay.		3.	+\$		0.00	+\$	N/A	-		
4.	Calculate gross Income. Add	l line 2 + line 3.		4.	\$	4,4	40.32	\$	N/A			

Debt	or 1	Brandi R Harris		(Case r	number (if k	nown) .				
					For	Debtor 1				ebtor	2 or pouse	
	Сор	y line 4 here	4.		\$	4,440	0.32	2	\$		N/A	<u> </u>
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	331	5.77	7	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	_	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c	.	\$		0.00	_	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d	d.	\$		0.00)	\$		N/A	_
	5e.	Insurance	5e	€.	\$	7:	3.45	5	\$		N/A	<u> </u>
	5f.	Domestic support obligations	5f.		\$		0.00	_	\$		N/A	_
	5g.	Union dues	5g		\$		0.00	_	\$		N/A	_
	5h.	Other deductions. Specify:	_ 5h	1.+	\$		0.00) +	- \$		N/A	<u>\</u>
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		9.22		\$		N/A	_
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	4,03	1.10)_	\$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	ì.	\$	6 [,]	1.67	7	\$		N/A	
	8b.	Interest and dividends	8b).	\$		0.00	_	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c) .	\$		0.00	_	\$		N/A	_
	8d.	Unemployment compensation	8d	d.	\$		0.00	_	\$		N/A	_
	8e.	Social Security	8e	€.	\$		0.00)	\$		N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	_ 8f. 8g		\$		0.00	_	\$		N/A N/A	
	8h.	Other monthly income. Specify:	_		\$		0.00	_	- \$		N/A	_
		· · · · · · · · · · · · · · · · · · ·	_	Г				_				_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	,	\$	6′	1.67	7	\$		N/	Α
10	Calc	culate monthly income. Add line 7 + line 9.	10.	\$		1,092.77	1.	\$		N/A	= \$	4,092.77
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		+,032.77	┤	Ψ_		IVA	- ^{\Pi} -	4,032.77
11.	Stat Inclu	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives. In the contribution of the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your per friends or relatives.	depe		,	,				chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies								12.	\$	4,092.77
13.	Do y	you expect an increase or decrease within the year after you file this form' No.	?							ţ	Combi month	ned ly income
	=	NO.										

Fill	in this informa	tion to identify yo	our case:					
Deb		Brandi R Ha					c if this is:	
	tor 2 ouse, if filing)						A supplement show	ving postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: SOUTH	ERN DISTRICT OF ILLIN	OIS	<u> </u>	MM / DD / YYYY	
	e number nown)							
Of	fficial Fo	rm 106J						
		J: Your						12/15
info	rmation. If m	and accurate as ore space is ne n). Answer ever	eded, atta	. If two married people and the control of the cont	e filing together, be form. On the top of	oth are equa any addition	lly responsible fon nal pages, write y	or supplying correct your name and case
Pari	t 1: Descr	ibe Your House	hold					
	■ No. Go to □ Yes. Doe	o line 2. s Debtor 2 live i	·	ate household?	o for Soporato House	shold of Dobts	or 2	
2.		es. Deblor 2 mus	_	ai Foitii 1005-2, <i>Experise</i> s	в 101 Зерагате поиѕе	eriola di Debit	JI 2.	
۷.	Do not list D Debtor 2.	•	□ No ■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state dependents				Son		7	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
3.	expenses of yourself and	penses include f people other to d your depende	han nts? □	No Yes				☐ Yes
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		n assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	enses
4.		or home owners and any rent for the		uses for your residence. I or lot.	nclude first mortgage	e 4. \$		925.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	•	rty, homeowner's				4b. \$		0.00
		maintenance, re owner's associat		upkeep expenses dominium dues		4c. \$ 4d. \$		0.00 0.00
5.				our residence, such as ho	me equity loans	5. \$		0.00

wn)
244.00
90.00
225.00
0.00
525.00
250.00
100.00
150.00
155.00
133.00
300.00
100.00
0.00
0.00
0.00
147.00
0.00
0.00
426.55
0.00
0.00
0.00
0.00
0.00
0.00
me.
0.00
0.00
0.00
0.00
0.00
99.00
3,736.55
3,730.33
2 720 FF
3,736.55
4,092.77
3,736.55
2,. 23.00
A=
356.22
o increase or decrease because o
nt to

nis is an filing
12/15
12/10
roperty, or
for up to 20
arer's Notice,
arer's Notice, ial Form 119)

Debtor 1	Brandi R Harris			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT OF	FILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
Official Fo	orm 107			
		ffairs for Individ	uals Filing for Bankruptcy	4/1
information. If n	nore space is needed, a n). Answer every quest	ttach a separate sheet to th	e filing together, both are equally responsi his form. On the top of any additional pages	
<u> </u>	ır current marital status	?		
☐ Married ■ Not ma	d			
2. During the	last 3 years, have you li	ved anywhere other than w	here you live now?	
□ No ■ Yes. Li	st all of the places you liv	ed in the last 3 years. Do not	include where you live now.	
Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Address:	Dates Debtor 2 lived there
819 Elm V Apt 6 Belleville	Way Court , IL 62223	From-To: 04/16 - 04/19	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
511 S. Jac Apt. A Belleville		From-To: 04/19 - 10/19	☐ Same as Debtor 1	☐ Same as Debtor 1 From-To:
			Il equivalent in a community property state ada, New Mexico, Puerto Rico, Texas, Washir	
■ No				
☐ Yes. M	ake sure you fill out Sche	dule H: Your Codebtors (Office	cial Form 106H).	
Part 2 Expla	in the Sources of Your	Income		
Fill in the tot	al amount of income you	received from all jobs and all	a business during this year or the two pre businesses, including part-time activities. together, list it only once under Debtor 1.	vious calendar years?
□ No				
Yes. Fi	Il in the details.			
		Debtor 1	Debtor 2	

Official Form 107

Del	otor 1	Br	andi R Ha	rris		Cas	e number (if known)		
					Debtor 1		Debtor 2		
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incom Check all that appl		Gross income (before deductions and exclusions)
			1 of curre iled for ba	nt year until nkruptcy:	■ Wages, commissions, bonuses, tips	\$5,888.69	☐ Wages, commis bonuses, tips	ssions,	
					☐ Operating a business		Operating a bus	siness	
			dar year: December	31, 2019)	■ Wages, commissions, bonuses, tips	\$44,380.00	☐ Wages, commis bonuses, tips	ssions,	
					☐ Operating a business		Operating a bus	siness	
			dar year be December		■ Wages, commissions, bonuses, tips	\$40,724.20	☐ Wages, commis bonuses, tips	ssions,	
					☐ Operating a business		☐ Operating a bus	siness	
	List	No	source and	-	ome from each source separat	tely. Do not include income t	hat you listed in line 4	l.	
					Debtor 1		Debtor 2		
					Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incomposcribe below.	ie	Gross income (before deductions and exclusions)
Pai	t 3:	List	Certain Pa	ayments You	Made Before You Filed for I	Bankruptcy			
6.	Are	either No.	Neither D	ebtor 1 nor D	's debts primarily consumer Debtor 2 has primarily consu personal, family, or househol	imer debts. Consumer debt	s are defined in 11 U.	S.C. § 10 ⁻	1(8) as "incurred by an
			During the	90 days befo	ore you filed for bankruptcy, die	d you pay any creditor a tota	I of \$6,825* or more?	•	
			□ _{No.}	Go to line 7					
			Yes	paid that cr not include	each creditor to whom you paid editor. Do not include payment payments to an attorney for the	its for domestic support oblignis bankruptcy case.	ations, such as child	support a	nd alimony. Also, do
			•	•	t on 4/01/22 and every 3 years		or after the date of a	ajustment.	•
		Yes.			or both have primarily consure you filed for bankruptcy, did		l of \$600 or more?		
			□ No.	Go to line 7	,				
			■ Yes	include pay	each creditor to whom you pai ments for domestic support ol this bankruptcy case.		•	•	
	Cre	ditor'	s Name an	d Address	Dates of payme	nt Total amount	Amount you V	Vas this p	payment for

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
	Manood Maner	12/19 - \$1,025 01/20 - \$1,080 02/03/20 - \$925	\$3,030.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Rep ☐ Suppliers ■ Other R	ard payment s or vendors
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	rtners; relatives of any gen control, or owner of 20% of	eral partners; partne or more of their voting	erships of which you	ou are a genera ny managing a	al partner; corporations gent, including one for
	No☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupto insider? Include payments on debts guaranteed or cos No		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
		,,,,	paid	still owe	Include cred	
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. Case title					t or custody
	Case number	Nature of the case	Court or agency		Status Of th	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. Creditor Name and Address		erty repossessed, fo	oreclosed, garnis	shed, attached	I, seized, or levied? Value of the
	Greater Name and Address	Explain what happened	4	Duto		property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment becan No Yes. Fill in the details.	tcy, did any creditor, inc		ancial institution	n, set off any a	mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or at No Yes		erty in the possessi	on of an assigne	e for the bene	efit of creditors, a

Debtor 1 Brandi R Harris

De	Brandi R Harris		Case number	(If Known)	
Pai	rt 5: List Certain Gifts and Contribution	ns			
13.	■ No	cruptcy, c	lid you give any gifts with a total value of more t	han \$600 per person	?
	Yes. Fill in the details for each gift.		B 11 11 11	D /	
	Gifts with a total value of more than \$6 per person	500	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	d			
14.	■ No		lid you give any gifts or contributions with a tota	I value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or			_	
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed	Dates you contributed	Value
Pai	rt 6: List Certain Losses				
15.	Within 1 year before you filed for bankroor gambling?	uptcy or	since you filed for bankruptcy, did you lose anyt	thing because of the	it, fire, other disaster
	☐ Yes. Fill in the details.				
	Describe the property you lost and	Descri	be any insurance coverage for the loss	Date of your	Value of property
	how the loss occurred		the amount that insurance has paid. List pending nee claims on line 33 of Schedule A/B: Property.	loss	lost
Pai	rt 7: List Certain Payments or Transfer	rs			
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or	uptcy, di preparir	d you or anyone else acting on your behalf pay on a bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you
	□ No				
	Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not	You	transferred	or transfer was made	payment
	J. D. Graham, PC		Filing Fee \$335	01/27/20	\$999.00
	#1 Eagle Center; Suite 3A		Credit Counseling \$25		·
	O Fallon, IL 62269 jd@jdgrahamlaw.com		Attorney Fees \$639		
17.	promised to help you deal with your cree Do not include any payment or transfer tha	editors o		or transfer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.				
	Person Who Was Paid		Description and value of any property	Date navment	Amount of
	Address		Description and value of any property transferred	Date payment or transfer was made	payment

Case number (if known) Debtor 1 Brandi R Harris

18.	Include both of include gifts a	rs before you filed for bankrup n the ordinary course of your boutright transfers and transfers m and transfers that you have alread in the details.	business or financial nade as security (such	affairs? as the granting of a			
	Person Who Address	Received Transfer	Description ar property trans			any property or received or debts change	Date transfer was made
	Person's re	ationship to you				_	
19.	beneficiary? No	ars before you filed for bankru (These are often called asset-pr		r any property to a	self-settled tru	ust or similar device o	of which you are a
	Name of tru	st	Description ar	nd value of the prop	perty transferr	ed	Date Transfer was
			·	·	,		made
Pai	rt 8: List of	Certain Financial Accounts, In	nstruments, Safe Dep	osit Boxes, and Sto	orage Units		
20.	sold, moved Include chec	r before you filed for bankrupto or transferred? king, savings, money market,	or other financial acc	counts; certificates	of deposit; sh		
	■ No	sion funds, cooperatives, asso in the details.	ociations, and other fi	inancial institutions	5.		
		nancial Institution and mber, Street, City, State and ZIP	Last 4 digits of account number	Type of account instrument	clo mo	te account was osed, sold, oved, or nsferred	Last balance before closing or transfer
21.		have, or did you have within 1 er valuables?	year before you filed	for bankruptcy, an	ny safe deposi	t box or other deposit	tory for securities,
	■ No						
	Name of Fir	in the details. ancial Institution mber, Street, City, State and ZIP Code)	Who else had Address (Numb State and ZIP Code	er, Street, City,	Describe the	contents	Do you still have it?
22.	Have you sto	ored property in a storage unit			vear before vo	ou filed for bankruptc	v?
	■ No	p. opo, a o.o. age a	, o. p		,		, .
	☐ Yes. Fill	in the details.					
		orage Facility mber, Street, City, State and ZIP Code)	Who else has to it? Address (Numb State and ZIP Code		Describe the	contents	Do you still have it?
Pai	rt 9: Identif	y Property You Hold or Control	ol for Someone Else				
23.	Do you hold for someone	or control any property that so	omeone else owns? I	nclude any propert	y you borrowe	ed from, are storing fo	or, or hold in trust
	■ No □ Yes. Fil	I in the details.					
	Owner's Na Address (Nu	me mber, Street, City, State and ZIP Code)	Where is the p (Number, Street, C Code)		Describe the	property	Value
Pa	rt 10: Give D	etails About Environmental Inf	•				
For	the purpose of	of Part 10, the following definit	tions apply:				
	Environmen	tal law means any federal, state	e, or local statute or i	regulation concern	ing pollution.	contamination, releas	es of hazardous or
Offic	ial Form 107	-	ment of Financial Affairs	_		,	page \$

page 5

Debtor 1 Brandi R Harris Case number (if known)

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	nazardous material, pollutant, contaminant,	hazardous material, pollutant, contaminant, or similar term.					
Rep	ort all notices, releases, and proceedings tha	t you know about, regardless of when	they occu	ırred.			
24.	Has any governmental unit notified you that	you may be liable or potentially liable	under or i	n violation of an environm	ental law?		
	■ No						
	Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice		
25.	Have you notified any governmental unit of a	any release of hazardous material?					
	■ No □ Yes. Fill in the details.						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		onmental law, if you it	Date of notice		
26.	Have you been a party in any judicial or adm	inistrative proceeding under any envi	ronmental	law? Include settlements	and orders.		
	■ No						
	Yes. Fill in the details.						
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of	the case	Status of the case		
Par	t 11: Give Details About Your Business or C	Connections to Any Business					
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have an	y of the fo	llowing connections to any	/ business?		
	■ A sole proprietor or self-employed in	a trade, profession, or other activity,	either full-	time or part-time			
	☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	p (LLP)				
	☐ A partner in a partnership						
	☐ An officer, director, or managing exe	ecutive of a corporation					
	☐ An owner of at least 5% of the voting	g or equity securities of a corporation					
	☐ No. None of the above applies. Go to P	art 12.					
	■ Yes. Check all that apply above and fill	in the details below for each business	-				
	Business Name Address (Number Street City State and 7/D Code)	Describe the nature of the business		loyer Identification numbe ot include Social Security			
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Date	s business existed			
	Brandi Harris	Custom t-shirts	EIN:	xxx-xx-7210			
	2006 Celebration Park Cir Belleville, IL 62220	Self	Fron	n-To 10/19 - Present			

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 46 of 62

Debtor 1	Brandi R Harris		Case number (if known)
	n 2 years before you filed for bankru utions, creditors, or other parties.	ptcy, did you give a financial statement to	anyone about your business? Include all financial
= 1	No		
□ `	Yes. Fill in the details below.		
Nam Addı (Numb	•	Date Issued	
Port 12	Sign Below		
are true ar with a ban 18 U.S.C.	nd correct. I understand that making		I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
Brandi F		Signature of Debtor 2	
Signature	e of Debtor 1		
Date Fe	ebruary 20, 2020	Date	
■ No	ttach additional pages to <i>Your Staten</i>	nent of Financial Affairs for Individuals Fil	ing for Bankruptcy (Official Form 107)?
☐ Yes			
Did you pa	ay or agree to pay someone who is n	ot an attorney to help you fill out bankrupt	cy forms?
No			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this informat	ion to identify your c	ase:		
	Brandi R Harris			
_	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankr	ruptcy Court for the:	SOUTHERN DISTI	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Form	n 108			
		n for Indiv	iduals Filing Under Chapt	er 7 12/15
Otatement	Of intention	1101 IIIaiv	iduais i iiiig chaci chapt	12/13
	ual filing under chap	• •	out this form if:	
_	aims secured by you personal property ar		at expired	
You must file this fo	orm with the court wi	thin 30 days after y	you file your bankruptcy petition or by the date set time for cause. You must also send copies to the	
	le are filing together late the form.	in a joint case, bot	h are equally responsible for supplying correct	information. Both debtors must
	accurate as possible name and case num		needed, attach a separate sheet to this form. Or	n the top of any additional pages,
Part 1: List Your	Creditors Who Have	Secured Claims		
For any creditors information below	•	rt 1 of Schedule D:	Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
	or and the property th	at is collateral	What do you intend to do with the property tha	
			secures a debt?	as exempt on Schedule C?
Creditor's Cap	ital One Auto Fina	nce	☐ Surrender the property.	■ N:
name:	nai Ono Aato i ma	100	Retain the property and redeem it.	■ No
Description of 2	2012 Mercedes-Ber	ız GLK350	Retain the property and enter into a Reaffirmation Agreement.	Yes
property	05,000 miles NADA Value		Retain the property and [explain]:	
securing debt:	NADA Value			_
	Unexpired Personal			
in the information b	elow. Do not list real	estate leases. Une	n Schedule G: Executory Contracts and Unexpirex expired leases are leases that are still in effect; the the trustee does not assume it. 11 U.S.C. § 365(p)	he lease period has not yet ended.
Describe your unex	xpired personal prop	erty leases		Will the lease be assumed?
Lessor's name:	Manood Maner			□ No
				Yes
Description of lease	d Rent			
Property:	\$925/month			

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

De	btor 1 Brandi R Harris	Case number (if known)
Pai	rt 3: Sign Below	
	der penalty of perjury, I declare that I have indicate perty that is subject to an unexpired lease.	ed my intention about any property of my estate that secures a debt and any personal
X	/s/ Brandi R Harris	X
	Brandi R Harris	Signature of Debtor 2
	Brandi R Harris Signature of Debtor 1	Signature of Debtor 2

			_			
Filli	n this information to identify your case:				directed in this form and	in Form
Deb	tor 1 Brandi R Harris		122	2A-1Supp:		
	tor 2			■ 1. There is no pre	sumption of abuse	
Unit	ed States Bankruptcy Court for the: Southern Dis	trict of Illinois		applies will be	to determine if a presumade under Chapter 7	
Cas (if kno	e number				fficial Form 122A-2).	
(II KIIC	own)				st does not apply now be ry service but it could ap	
~ (☐ Check if this is	an amended filing	
	icial Form 122A - 1					
Ch	apter 7 Statement of Your C	Surrent Month	ly Inc	ome		12/19
attacl case	complete and accurate as possible. If two married per h a separate sheet to this form. Include the line number number (if known). If you believe that you are exempte fying military service, complete and file <i>Statement of E</i> Calculate Your Current Monthly Income	r to which the additional info ed from a presumption of abo	ormation a use becau	applies. On the top of a se you do not have pr	any additional pages, wri imarily consumer debts o	te your name and or because of
1.	What is your marital and filing status? Check o	ne only.				
	■ Not married. Fill out Column A, lines 2-11.					
	\square Married and your spouse is filing with you.	Fill out both Columns A and	d B, lines	2-11.		
	\square Married and your spouse is NOT filing with	you. You and your spous	se are:			
	☐ Living in the same household and are not	: legally separated. Fill ou	it both Co	lumns A and B, lines	2-11.	
	☐ Living separately or are legally separated penalty of perjury that you and your spouse living apart for reasons that do not include e	are legally separated unde	er nonban	kruptcy law that appl	lies or that you and you	
10 th	ill in the average monthly income that you received fro 01(10A). For example, if you are filing on September 15, th e 6 months, add the income for all 6 months and divide the pouses own the same rental property, put the income from	e 6-month period would be Ma e total by 6. Fill in the result. De	arch 1 throus not include	ugh August 31. If the am de any income amount r	nount of your monthly incom more than once. For examp	ne varied during ble, if both
				Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtipayroll deductions).	ime, and commissions (b	efore all	\$ 4,781.89	\$	
3.	Alimony and maintenance payments. Do not inc Column B is filled in.	clude payments from a spo	ouse if	\$ 0.00	\$	
4.	All amounts from any source which are regular of you or your dependents, including child sup from an unmarried partner, members of your hous and roommates. Include regular contributions from filled in. Do not include payments you listed on line	pport. Include regular contrehold, your dependents, par a spouse only if Column I	ributions arents,	\$ 0.00	\$	
5.	Net income from operating a business, profess	•				
		Debtor 1 \$ 154.17				
	Gross receipts (before all deductions)	\$ 154.17 -\$ 92.50	_			
	Ordinary and necessary operating expenses Net monthly income from a business,		Copy			
	profession, or farm	\$ 61.67	here ->	\$ 61.67	\$	
6.	Net income from rental and other real property	Debtor 1				
	Gross receipts (before all deductions)	\$ 0.00				
	Ordinary and necessary operating expenses	-\$0.00				
	Net monthly income from rental or other real proper	erty \$ <u>0.00</u> Cop	y here ->		\$ \$	
7.	Interest, dividends, and royalties			\$0.00	φ	

Official Form 122A-1

Case number (if known)

										Colui Debt	mn A or 1		Colum Debto non-fi		oouse		
8.	Unem	ploy	ment con	npensation						\$		0.00	\$				
				ount if you co	ontend that th list it here:	ne amount	received w	vas a benef	t under								
	For	you				\$		0.0	00								
9.	benefi not ind United disabil pay pa does r	it und clude d Stat lity, o aid ur not ex	er the Soc any comp es Govern r death of nder chap sceed the	cial Security bensation, ponment in cor a member of ter 61 of title amount of re	Do not include Act. Also, exension, pay, annection with of the uniformed 10, then include tired pay to the 10 other the second of the second o	ccept as stannuity, or a disability ned service lude that p which you	ated in the rallowance y, combat-les. If you re ay only to would other	next senter e paid by the related injure eceived any the extent the erwise be en	nce, do e y or retired nat it	\$		0.00	\$				
10	Do not receive domes United disabil	t inclued as stic te description to the stict te description to the stick at the st	ude any b s a victim errorism; c es Govern r death of	enefits recei of a war crim or compensa nment in cor a member o	not listed aboved under the ne, a crime agation, pension nection with of the uniform put the total	e Social S gainst hum n, pay, ann a disability ned service	ecurity Act nanity, or ir luity, or allo y, combat-l	; payments nternational owance paid related injur	or I by the y or								
										\$		0.00	\$				
										\$		0.00	\$				
		To	tal amour	nts from sep	arate pages,	if any.			+	\$		0.00	\$				
11.					onthly incom for Column A				\$	4,843	.56	+ \$ _			= \$	4,843.56	-
Part					Means Test										incon	ne	
12.				•	y income for hthly income f	•		•			Сор	y line 11	here=>		\$	4,843.56	
	N	Лultiр	ly by 12 (1	he number o	of months in a	a year)									X	12	
	12b. T	he re	esult is yo	ur annual ind	come for this	part of the	e form							12b.	\$	58,122.72	-
13	Calcu	late t	he media	n family in	come that ap	pplies to y	ou. Follow	these step	s:								_
	Fill in	the st	tate in wh	ch you live.			IL										
	Fill in	the n	umber of	people in yo	ur household	d.	2										
	To find	d a lis	st of applic	able media	or your state n income amo e available at	ounts, go	online usin	g the link sp	ecified	in the	separ	ate instruc	tions	13.	\$	71,301.00	-
14.	. How o	do th	e lines co	mpare?			, ,										
	14a.		Line 12	is less than	n or equal to I				eck box	1, <i>The</i>	ere is	no presun	nption of	abuse			
	14b.		Line 12	is more tha	T fill out or fil an line 13. On out Form 122	n the top o			The pr	esump	tion o	f abuse is	determir	ned by	Form 1	22A-2.	
Part	3:	Sign	n Below	art o ariu illi	Out I OIIII 122	LI											
				, I declare u	nder penalty	of perjury	that the inf	ormation or	this sta	atemer	nt and	in any att	achment	s is tru	e and o	correct.	
			Brandi F									•					
	^	Bra	andi R H	arris													
	_	·	bruary 2														

Brandi R Harris

Debtor 1

Case 20-30169-lkg Doc 1 Filed 02/20/20 Page 51 of 62

Debtor 1	Brandi R Harris	Case number (if known)	
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form.		

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chap	ter 7:	Liquidation	
	\$245	filing fee	_
	\$75	administrative fee	
<u>+</u>	\$15	trustee surcharge	
	\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

United States Bankruptcy Court Southern District of Illinois

In re	Brandi R Harris		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMP	ENSATION OF ATTORN	EY FOR DE	EBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 compensation paid to me within one year before the fipe rendered on behalf of the debtor(s) in contemplation	iling of the petition in bankruptcy, or	agreed to be paid	to me, for services rendere	ed or to
	For legal services, I have agreed to accept		\$	639.00	
	Prior to the filing of this statement I have receive	ed	\$	639.00	
	Balance Due		\$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed con	mpensation with any other person unl	less they are mem	bers and associates of my l	aw firm.
	☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the				rm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all aspects of	f the bankruptcy of	ease, including:	
	 a. Analysis of the debtor's financial situation, and rer b. Preparation and filing of any petition, schedules, s c. Representation of the debtor at the meeting of cred d. [Other provisions as needed] Exemption Planning 	tatement of affairs and plan which ma	ay be required;		y;
б.	By agreement with the debtor(s), the above-disclosed Representation of the debtors in any redemptions or any other adversary p or section 2004 examinations. All Add this disclosure prevents counsel from by third parties in Ch. 7 and Ch 13 cases	dischargeability actions, judicia proceedings; filing of reaffirmati litional fees shall require prior a n collecting Court-Approved fee	Il lien avoidanc on agreements approval of the s in connectior	and applications as no Bankruptcy Court. Not	hing in
		CERTIFICATION			
	certify that the foregoing is a complete statement of ankruptcy proceeding.	any agreement or arrangement for pa	yment to me for r	epresentation of the debtor	(s) in
	ebruary 20, 2020	/s/ J. D. Graham			
L	ate	J. D. Graham 06211 Signature of Attorney	732		
		J. D. Graham, PC			
		#1 Eagle Center; Su O Fallon, IL 62269	ite 3A		
		(618) 235-9800 Fax		5	
		jd@jdgrahamlaw.co Name of law firm	om		
		Trante of tan firm			

United States Bankruptcy Court Southern District of Illinois

In re	Brandi R Harris		Case No.							
		Debtor(s)	Chapter 7							
	VERIFICATION OF CREDITOR MATRIX									
		or(s) hereby verify that the attached nowledge and that it corresponds to								
Date:	February 20, 2020	/s/ Brandi R Harris								
		Brandi R Harris								
		Signature of Debtor								

Affordable Dentistry 1801 North Belt West Suite C Belleville, IL 62226

Ameren IP Credit & Collections 2105 E State Route 104 Pawnee, IL 62558

Americollect 1851 S. Alverno Road Manitowoc, WI 54221

ATG Credit, LLC PO Box 14895 Chicago, IL 60614

Brother Loan & Finance 327 Missouri Avenue Suite 504 East Saint Louis, IL 62201

Capital One Auto Finance Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Bank Attn: Bankruptcy Department PO Box 30285 Salt Lake City, UT 84130

CEPAMERICA ILLINOIS LLP PO Box 582663 Modesto, CA 95358

Citifinancial aka OneMain Financial NTBS-2320 6801 Colwell Blvd. Irving, TX 75039

Comet Funding d/b/a Comet Loans Tonton Apache Reservation #30 Payson, AZ 85541 Consumer Collection Management PO Box 1839 Maryland Heights, MO 63043

Credit Collection Services Two Wells Ave Dept 9134 Newton Center, MA 02459

Credit Management Company 6080 Tennyson Pkwy 100 Plano, TX 75024

Credit One Bank PO Box 98873 Las Vegas, NV 89193

Crystal Rock Finance 327 Missouri Ave; Suite 300 East Saint Louis, IL 62201

First Community Credit Union 1517 Manchester Ballwin, MO 63011

H3 Capital O Fallon, IL 62269

Heartland Women's Healthcare 3230 Veterans Memorial Drive Mount Vernon, IL 62864

HSHS Medical Group Patient Financial Services PO Box 20727 Springfield, IL 62708

Illinois American Water PO Box 94551 Palatine, IL 60094

Infinity Meds LLP PO Box 078180 Milwaukee, WI 53278-8180 JC Penny c/o Synchrony Bank Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896

Lindenwood University 209 S. Kingshighway Saint Charles, MO 63301

LVNV Funding LLC 625 Pilot Rd. Suite 213 Las Vegas, NV 89119

Macy's
Department Store National Bank
Bankruptcy Processing
PO Box 8053
Mason, OH 45040

National Service Bureau 18912 North Creek Pkwy Suite 205 Bothell, WA 98011

NC Financial 175 W. Jackson Blvd Suite 1000 Chicago, IL 60604

Nelnet 3015 South Parker Rd., Suite 400 Aurora, CO 80014

Progressive Insurance 6300 Wilson Mills Rd. Cleveland, OH 44143

Progressive Leasing 256 W Data Dr Draper, UT 84020

Radiology Consultants of MidAmerica 3 Eagle Center Suite 1 O Fallon, IL 62269 Regions Bank 4800 W Main St. Belleville, IL 62223

Sher & Shasbin PC 1 Campbell Plaza Suite 1A North Saint Louis, MO 63139

SIHF Healthcare PO Box 14099 Belfast, ME 04915

Sprint 6391 Sprint Parkway Overland Park, KS 66251

St. Clair County Clerk of the Circuit Court PO Box 691 Belleville, IL 62222

TH Promed Collections PO Box 10166 Peoria, IL 61612

US Bank PO Box 6352 Cincinnati, OH 45201

Verizon Bankruptcy Administration 1515 Woodfield Rd Schaumburg, IL 60173

Wakefield & Associates PO Box 50250 Knoxville, TN 37950

Woodforest National Bank PO Box 7889 Spring, TX 77387 YMCA Belleville 200 S. Illinois Belleville, IL 62220